
PATIENT CHECKLIST IN PREPARATION FOR YOUR SURGERY OR PROCEDURE:

- [] Bring your surgery guide to all pre and postoperative appointments **and** on the day of surgery.
- [] Complete the “APEC Pre-Anesthesia Patient Questionnaire” located in the back of this packet.
- [] Complete all of your pre-procedure appointments for history and physical examination and pre-operative tests, including blood donation, if applicable, in a timely manner.
- [] Take a list of questions with you when you visit your doctor.
- [] Bring a list of all prescriptions, herbal supplements, and over-the-counter medicines that you are taking, including when you took the most recent dose of each medicine.
- [] Ask your physician what medications you need to stop and how long prior to surgery.
- [] Ask your physician if your surgery or procedure will require the use of a dye and alert him/her if you have a known reaction or allergy to dyes.
- [] Inform your physician if you are allergic to shellfish, lobsters, crabs, or other shelled foods; latex-containing products; or if you have cobalt-containing metal implants, or if you need to take allergy medications the day before your procedure.
- [] Discuss pain control with your physician regarding oral medications, IV, PCA pump, and other options to control pain after surgery.
 - If you are taking high doses of opiates (examples of medications with opiates are morphine and codeine), inform your physician for a pain management consultation for effective pain control after surgery.
 - If you are taking any form of Buprenorphine (Suboxone, Subutex, Buprenex, Butrans), inform your physician. Your elective surgery may be canceled if this medication is not stopped at least 72 hours prior to surgery.
- [] Inform your physician of your alcohol consumption: number of drinks per day, how long and the date you quit consuming alcohol, if applicable.
- [] Inform your physician if you use recreational drugs: name of drug, frequency, how long and date you quit taking the drug, if applicable.
- [] Inform your physician if you are smoking: number of cigarettes/tobacco/day, how long and the date you quit smoking, if applicable.

- Inform your surgeon immediately if you have a cold, fever, chills, burning pain when passing urine, or persistent cough that developed within 2 days prior to surgery.
- Arrange for a responsible adult to drive you home and stay with you at least for 24 hours. A bus driver or cab driver is not considered a responsible adult caregiver. **You may not drive or take a taxicab or bus alone after receiving sedation or anesthesia.**
- NAME OF ESCORT:**
.....
- PHONE NUMBERS:**
.....
- Obtain equipment and supplies that you may need after your surgery or procedure.
- Take a special diet or any bowel preparation prior to your surgery as directed.
- Take a shower with regular soap **and** water the night before and the morning of surgery. Do not shave near the operative area. Make sure your hair is dry.
- If directed by your physician, take a shower with an antiseptic soap containing CHG (Chlorhexedine Gluconate) the night before **and** the morning of surgery (refer to “Pre-Operative Antiseptic Shower” instructions in this booklet.)
- Do not wear mascara or false eyelashes the day of surgery. Any jewelry that is too tight must be removed before coming to the hospital.
- Do not eat or drink after midnight the night before surgery or as instructed by your physician. This includes coffee, tea, chewing gum, or mints.
- Take your medications as instructed by your physician the morning of surgery with only a sip of water (example, beta-blockers for high blood pressure; medications for the heart and seizures, etc.),
- Confirm your arrival time at ____ a.m./p.m. with your surgeon’s office.
- Provide your surgeon with your local contact number to reach you.
- Check your phone for any messages in case there are changes in your surgery schedule.